

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3		2				
4	1					
5	1					
6		2				
7		2				
8	1					
9	1					
10		1				
11	1					
12	1					
13		2				
14		2				
15	1					
16	1					
17	1					
18		2				
19	1					
20		1				
21	1					
22	1					
23	1					
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42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	19					
TOTAL DEP.	14					
TOTAL CLAIMS	33					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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58						
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96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

BEST AVAILABLE COPY